

EXHIBIT E

NOTIFICATION OF DISPOSITION OF COLLATERAL

June 9, 2021

To:

Lizer Josefovich
53 Mariner Way
Monsey, New York 10952-1248

Metropolitan Commercial Bank
99 Park Avenue, 4th floor
New York, New York 10016

Windels Marx Lane & Mittendorf, LLP
156 West 56th Street
New York, New York 10019
Attn: Michele Arbeeney, Esq.
Robert Malatak, Esq.

Michelman & Robinson, LLP
800 Third Ave., 24th Fl
New York, NY 10022
Attn: John Giardino, Esq.
Alex Barnett-Howell, Esq.

From: Howard Fensterman as nominee for White Plains Healthcare Properties, LLC,
2 Bourbon Street, Peabody, Massachusetts 01960 (Secured Party)

Re: Collateral Assignment and Pledge of Membership Interest and Security Agreement (the
“Pledge”), dated August 11, 2017, made by and between Lizer Josefovich (“Assignor”) and
Howard Fensterman, as nominee for White Plains Health Care Properties, LLC
 (“Assignee”) as such agreement may have been further amended or modified from
time to time.

We will sell the Collateral described in Exhibit A hereto and made a part hereof to the
highest qualified bidder in public as follows:

Day and Date: Thursday, July 1, 2021
Time: 10:00 a.m.
Place: DelBello Donnellan Weingarten Wise & Wiederkehr, LLP, One
North Lexington Avenue, White Plains, New York 10601, phone:
914-681-0200.

You are entitled to, at no charge, an accounting of the unpaid indebtedness secured by the
collateral that we intend to sell. You may request an accounting by contacting Alfred E. Donnellan
DelBello Donnellan Weingarten Wise & Wiederkehr, LLP One North Lexington Ave. White
Plains, NY 10601, Phone: 914-681-0200.

Very truly yours,

/s/ Howard Fensterman

Howard Fensterman as nominee for
White Plains Health Care Properties, LLC

EXHIBIT A

The Collateral to be sold consists of:

All rights, title and interest of Lizer Josefovic as a member in Waterview Acquisition 1, LLC.

AFFIDAVIT OF SERVICE

STATE OF NEW YORK)
)ss:
COUNTY OF WESTCHESTER)

MARISA WARSHAW, being sworn says:

I am not a party to the action, am over 18 years of age and reside at White Plains,
New York (office).

On June 9, 2021 I served a true copy of the annexed Notification of Disposition of
Collateral in the following manner:

by mailing the same in a sealed envelope, with postage prepaid thereon, in a post-
office or official depository of the U.S. Postal Service within the State of New York,
addressed to the last known address of the addressee(s) as indicated below:

Certified Mail, Return Receipt
Requested Tracking No.
7019 1120 0000 5118 3636
Lizer Josefovic
53 Mariner Way
Monsey, New York 10952-1248

Certified Mail, Return Receipt
Requested Tracking No.
7019 1120 0000 5118 3643
Metropolitan Commercial Bank
99 Park Avenue, 4th floor
New York, New York 10016

Certified Mail, Return Receipt
Requested Tracking No.
7019 1120 0000 5118 3650
Windels Marx Lane & Mittendorf, LLP
156 West 56th Street
New York, New York 10019
Attn: Michele Arbeeny, Esq.
Robert Malatak, Esq.

Certified Mail, Return Receipt
Requested Tracking No.
7019 1120 0000 5118 3667
Michelman & Robinson, LLP
800 Third Ave., 24th Fl
New York, NY 10022
Attn: John Giardino, Esq.
Alex Barnett-Howell, Esq.

and

by depositing the same with an overnight delivery service in a wrapper properly
addressed. Said delivery was made prior to the latest time designated by the overnight

delivery service for overnight delivery. The address and delivery service are indicated below:

Federal Express Tracking No.
2802 0945 3673
Lizer Josefovic
53 Mariner Way
Monsey, New York 10952-1248

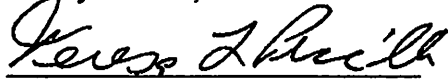
Federal Express Tracking No.
3802 0967 4508
Metropolitan Commercial Bank
99 Park Avenue, 4th floor
New York, New York 10016

Federal Express Tracking No.
2808 0981 8363
Windels Marx Lane & Mittendorf, LLP
156 West 56th Street
New York, New York 10019
Attn: Michele Arbeeny, Esq.
Robert Malatak, Esq.

Federal Express Tracking No.
2802 1009 1931
Michelman & Robinson, LLP
800 Third Ave., 24th Fl
New York, NY 10022
Attn: John Giardino, Esq.
Alex Barnett-Howell, Esq.


MARISA WARSHAW

Sworn to before me this
9th day of June, 2021


NOTARY PUBLIC

TERESA L. PICCILLO
Notary Public, State of New York
No. 4848926
Qualified in Westchester County
Commission Expires February 18, 2022

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

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7019 1120 0000 5118 3636
7019 1120 0000 5118 3636

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OFFICIAL USE

Certified Mail Fee \$
Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
Postage \$
Total Postage and Fees \$
Sent To Lizer Josefovich
Street and 53 Mariner Way
City, State, Zip+4 Monsey, New York 10952-1248
PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

2607206

SENDER: COMPLETE THIS SECTION

■ Complete items 1, 2, and 3.
■ Print your name and address on the reverse so that we can return the card to you.
■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
Lizer Josefovich
53 Mariner Way
Monsey, New York 10952-1248

2. Article Number (Transfer from service label)
7019 1120 0000 5118 3636

COMPLETE THIS SECTION ON DELIVERY


A. Signature ☐ Agent
X ☐ Addressee
B. Received by (Printed Name) C. Date of Delivery
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail
☐ Insured Mail Restricted Delivery (over \$500)
☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☒ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

PS Form 3811, April 2015 PSN 7530-02-000-9053 Domestic Return Receipt

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

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7019 1120 0000 5118 3667

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Certified Mail Fee	
\$	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage \$

Total Po \$

Sent To


Street a

City, Sta



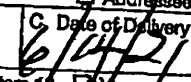
Postmark Here

Michelman & Robinson, LLP
800 Third Ave., 24th Fl
New York, NY 10022
Attn: John Giardino, Esq.
Alex Barnett-Howell, Esq.

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY																
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature</p> <p>X <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>																
<p>1. Article Addressed to:</p> <p style="text-align: center;">Michelman & Robinson, LLP 800 Third Ave., 24th Fl New York, NY 10022 Attn: John Giardino, Esq. Alex Barnett-Howell, Esq.</p>	<p>B. Received by (Printed Name)</p> <p>C. Date of Delivery</p>																
<p style="text-align: center;">  9590 9402 4956 9063 6209 78 </p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>																
<p>2. Article Number (Transfer from service label)</p> <p style="text-align: center;">7019 1120 0000 5118 3667</p>	<p>3. Service Type</p> <table style="width: 100%;"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input checked="" type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input checked="" type="checkbox"/> Return Receipt for Merchandise</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Insured Mail</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</td> <td></td> </tr> </table>	<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input checked="" type="checkbox"/> Return Receipt for Merchandise	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery	<input type="checkbox"/> Insured Mail		<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®																
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™																
<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery																
<input type="checkbox"/> Certified Mail Restricted Delivery	<input checked="" type="checkbox"/> Return Receipt for Merchandise																
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™																
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery																
<input type="checkbox"/> Insured Mail																	
<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)																	

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none">■ Complete items 1, 2, and 3.■ Print your name and address on the reverse so that we can return the card to you.■ Attach this card to the back of the mailpiece, or on the front if space permits.	<p>A. Signature </p> <p><input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>
<p>1. Article Addressed to:</p> <p>Michelman & Robinson, LLP 800 Third Ave., 24th Fl New York, NY 10022 Attn: John Giardino, Esq. Alex Barnett-Howell, Esq.</p>	<p>B. Received by (Printed Name) </p> <p>C. Date of Delivery </p>
<p>2. Article Addressed to:</p> <p>9590 9402 4956 9063 6209 78</p>	<p>D. Is delivery address different from item 1? If YES, enter delivery address below</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>	<p><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>
<p>2. Article Number (Transfer from service label)</p> <p>7019 1120 0000 5118 3667</p>	
<p>PS Form 3811, July 2015 PSN 7530-02-000-9053</p> <p>Domestic Return Receipt</p>	

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

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7019 1120 0000 5118 3650
7019 1120 0000 5118 3650

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OFFICIAL USE

Certified Mail Fee
\$ _____

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$ _____
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____

Postage
\$ _____

Total Postage
\$ _____

Sent To
Street and
City, State

Windels Marx Lane & Mittendorf, LLP
156 West 56th Street
New York, New York 10019
Attn: Michele Arbeeney, Esq.
Robert Malatak, Esq.

Postmark
Here

PS Form 3800, April 2015 PSN 7530-02-000-9042 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
Windels Marx Lane & Mittendorf, LLP
156 West 56th Street
New York, New York 10019
Attn: Michele Arbeeney, Esq.
Robert Malatak, Esq.

2. Article Number (Transfer from service label)
7019 1120 0000 5118 3650

9590 9402 4956 9063 6209 61

PS Form 3811, July 2015 PSN 7530-02-000-9063

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X _____ ☐ Agent
☐ Addressee

B. Received by (Printed Name) _____ C. Date of Delivery _____

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™
<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail Restricted Delivery	<input checked="" type="checkbox"/> Return Receipt for Merchandise
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Insured Mail	
<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	

Domestic Return Receipt

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE.

CERTIFIED MAIL®

7019 1120 0000 5118 3643

7019 1120 0000 5118 3643

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OFFICIAL USE

Certified Mail Fee \$
Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postage \$
Total Postage and Fees \$

Sent To
Street at
City, Sta

Metropolitan Commercial Bank
99 Park Avenue, 4th floor
New York, New York 10016

Postmark Here

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
Metropolitan Commercial Bank
99 Park Avenue, 4th floor
New York, New York 10016

9590 9402 4956 9063 6209 85

2. Article Number (Transfer from service label)
7019 1120 0000 5118 3643

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail
☐ Insured Mail Restricted Delivery (over \$500)

☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☒ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

ORIGIN ID: NESA (914) 681-0200
MARISA WARSHAW
DELBELLO DONNELLAN WEINGARTEN WISE
1 N LEXINGTON AVE

SHIP DATE: 09JUN21
ACTWGT: 0.12 LB
CAD: 114675706/WSX03600

WHITE PLAINS, NY 10601
UNITED STATES US

BILL SENDER

TO LIZER JOSEFOVIC

53 MARINER WAY

MONSEY NY 10952

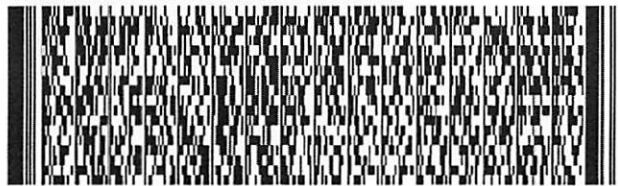
(914) 681-0200

REF 0181960-001

NY
PO

DEPT

560.036387FE4A



FedEx
Express



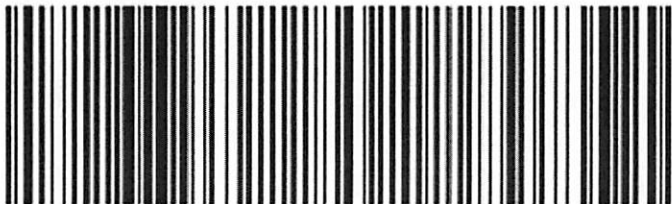
47112216316109

TRK# 2802 0945 3673
0201

THU - 10 JUN 12:00P
PRIORITY OVERNIGHT

EH PSBA

RES
10952
NY-US SWF



Marisa Warshaw

From: TrackingUpdates@fedex.com
Sent: Thursday, June 10, 2021 11:53 AM
To: Marisa Warshaw
Subject: [EXTERNAL] FedEx Shipment 280209453673: Your package has been delivered



x

Hi. Your package was
delivered Thu, 06/10/2021 at
11:51am.



Delivered to 53 MARINER WAY, Monsey, NY 10952

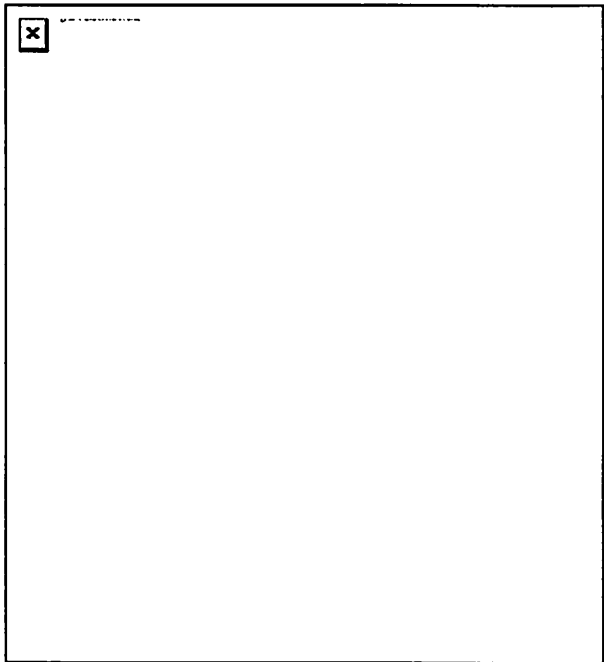
OBTAIN PROOF OF DELIVERY

TRACKING NUMBER [280209453673](#)

FROM DelBello Donnellan Weingarten Wise
1 N Lexington Ave
White Plains, NY, US, 10601

TO Lizer Josefovich
53 Mariner Way
Monsey, NY, US, 10952

REFERENCE	0181960-001
SHIPPER REFERENCE	0181960-001
SHIP DATE	Wed 6/09/2021 06:19 PM
DELIVERED TO	Residence
PACKAGING TYPE	FedEx Envelope
ORIGIN	White Plains, NY, US, 10601
DESTINATION	Monsey, NY, US, 10952
SPECIAL HANDLING	Deliver Weekday Residential Delivery
NUMBER OF PIECES	1
TOTAL SHIPMENT WEIGHT	0.50 LB
SERVICE TYPE	FedEx Priority Overnight




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All weights are estimated.

To track the latest status of your shipment, click on the tracking number above.

Standard transit is the date and time the package is scheduled to be delivered by, based on the selected service, destination and ship date. Limitations and exceptions may apply. Please see the FedEx Service Guide for terms and conditions of service, including the FedEx Money-Back Guarantee, or contact your FedEx Customer Support representative.

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Total Control Panel

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To: marisa@ddw-law.com

Message Score: 1

High (60): Pass

From:

My Spam Blocking Level: High

Medium (75): Pass

prvs=1795a8b798=bounce@nds.fedex.com

Low (90): Pass

[Block](#) this sender

[Block](#) nds.fedex.com

This message was delivered because the content filter score did not exceed your filter level.

ORIGIN ID: NESA (914) 681-0200
MARISA WARSHAW
DELBELLO DONNELLAN WEINGARTEN WISE
1 N LEXINGTON AVE

SHIP DATE: 08JUN21
ACTWGT: 0.12 LB
CAD: 114675706/WSX13600

WHITE PLAINS, NY 10601
UNITED STATES US

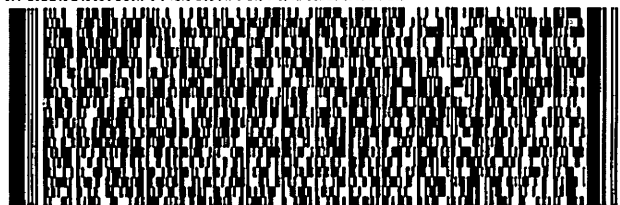
BILL SENDER

TO

METROPOLITAN COMMERCIAL BANK
99 PARK AVENUE
4TH FLOOR
NEW YORK NY 10016

56D138387FEA

(914) 681-0200 REF 0181930-001
NY
PO: DEPT

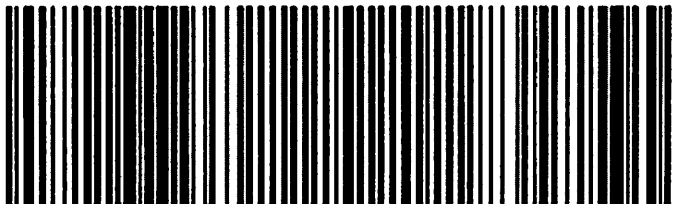


THU - 10 JUN 10:30A
PRIORITY OVERNIGHT

TRK# 2802 0967 4508
0201

E3 JRAA

10016
NY-US EWR



Marisa Warshaw

From: TrackingUpdates@fedex.com
Sent: Thursday, June 10, 2021 10:00 AM
To: Marisa Warshaw
Subject: [EXTERNAL] FedEx Shipment 280209674508: Your package has been delivered



x

Hi. Your package was
delivered Thu, 06/10/2021 at
9:58am.



Delivered to 99 PARK, New York, NY 10016
Received by L.RIVERA

OBTAIN PROOF OF DELIVERY

TRACKING NUMBER [280209674508](#)

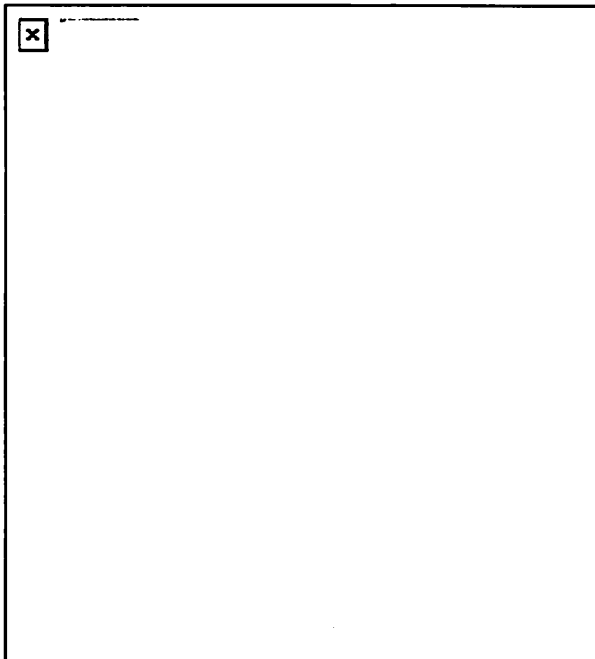
FROM DelBello Donnellan Weingarten Wise
1 N Lexington Ave
White Plains, NY, US, 10601

TO Metropolitan Commercial Bank
99 Park Avenue

4th Floor

New York, NY, US, 10016

REFERENCE	0181960-001
SHIPPER REFERENCE	0181960-001
SHIP DATE	Wed 6/09/2021 06:19 PM
DELIVERED TO	Receptionist/Front Desk
PACKAGING TYPE	FedEx Envelope
ORIGIN	White Plains, NY, US, 10601
DESTINATION	New York, NY, US, 10016
SPECIAL HANDLING	Deliver Weekday
NUMBER OF PIECES	1
TOTAL SHIPMENT WEIGHT	0.50 LB
SERVICE TYPE	FedEx Priority Overnight




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This report was generated at approximately 9:00 AM CDT 06/10/2021.

All weights are estimated.

To track the latest status of your shipment, click on the tracking number above.

Standard transit is the date and time the package is scheduled to be delivered by, based on the selected service, destination and ship date. Limitations and exceptions may apply. Please see the FedEx Service Guide for terms and conditions of service, including the FedEx Money-Back Guarantee, or contact your FedEx Customer Support representative.

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Thank you for your business.

Total Control Panel

[Login](#)

To: marisa@ddw-law.com

Message Score: 1

High (60): Pass

From:

My Spam Blocking Level: High

Medium (75): Pass

prvs=67955bbca7=bounce@nds.fedex.com

Low (90): Pass

[Block](#) this sender

[Block](#) nds.fedex.com

This message was delivered because the content filter score did not exceed your filter level.

ORIGIN ID: NESA (914) 681-0200
MARISA WARSHAW
DELBELLO DONNELLAN WEINGARTEN WISE
1 N LEXINGTON AVE

SHIP DATE: 09 JUN 21
ACTWGT: 0.12 LB
CAD: 114675706/WSX03600

WHITE PLAINS, NY 10601
UNITED STATES US

BILL SENDER

TO ROBERT MALATAK, ESQ.
WINDELS MARX LANE & MITTENDORF LLP
156 W 56TH ST

560.136367FE4A

NEW YORK NY 10019

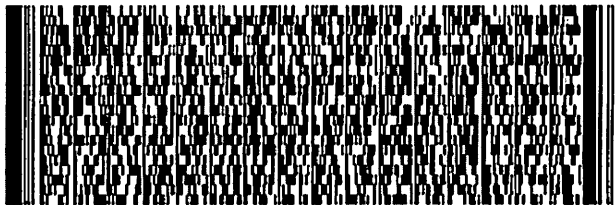
(914) 681-0200

REF 0101960-001

NY

PO

DEPT



FedEx
Express



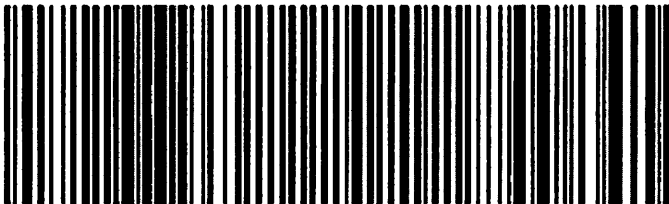
01112218316149

THU - 10 JUN 10:30A
PRIORITY OVERNIGHT

TRK# 2802 0981 8363
0201

E3 QNYA

10019
NY-US EWR



Marisa Warshaw

From: TrackingUpdates@fedex.com
Sent: Thursday, June 10, 2021 10:08 AM
To: Marisa Warshaw
Subject: [EXTERNAL] FedEx Shipment 280209818363: Your package has been delivered



x

Hi. Your package was
delivered Thu, 06/10/2021 at
10:05am.



Delivered to 156 W 56TH ST, NEW YORK, NY 10019
Received by S.KENNY

OBTAIN PROOF OF DELIVERY

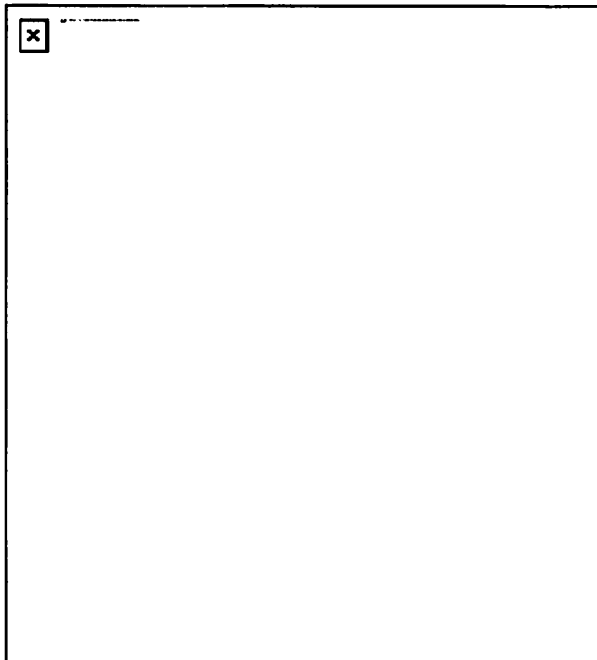
TRACKING NUMBER 280209818363

FROM DelBello Donnellan Weingarten Wise
1 N Lexington Ave
White Plains, NY, US, 10601

TO Windels Marx Lane & Mittendorf LLP
Robert Malatak, Esq.

156 W 56TH ST
NEW YORK, NY, US, 10019

REFERENCE	0181960-001
SHIPPER REFERENCE	0181960-001
SHIP DATE	Wed 6/09/2021 06:19 PM
DELIVERED TO	Shipping/Receiving
PACKAGING TYPE	FedEx Envelope
ORIGIN	White Plains, NY, US, 10601
DESTINATION	NEW YORK, NY, US, 10019
SPECIAL HANDLING	Deliver Weekday
NUMBER OF PIECES	1
TOTAL SHIPMENT WEIGHT	0.50 LB
SERVICE TYPE	FedEx Priority Overnight




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This report was generated at approximately 9:07 AM CDT 06/10/2021.

All weights are estimated.

To track the latest status of your shipment, click on the tracking number above.

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To: marisa@ddw-law.com

Message Score: 1

High (60): Pass

From:

My Spam Blocking Level: High

Medium (75): Pass

prvs=7795f31233=bounce@nds.fedex.com

Low (90): Pass

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ORIGIN ID: NESA (914) 681-0200
MARISA WARSHAW
DELBELLO DONNELLAN WEINGARTEN WISE
1 N LEXINGTON AVE

SHIP DATE: 09JUN21
ACTWGT: 0.12 LB
CAD: 114675706/WSX03600

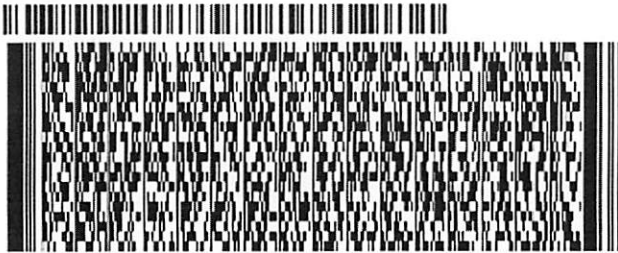
WHITE PLAINS, NY 10601
UNITED STATES US

BILL SENDER

TO JOHN GIARDINO, ESQ.
MICHELMAN & ROBINSON LLP
800 THIRD AVENUE
24TH FLOOR
NEW YORK NY 10022

560.036367FE4A

(914) 681-0200 REF: 0181960-001
NY
PO DEPT

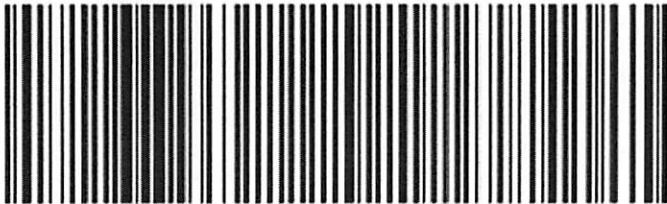


THU - 10 JUN 10:30A
PRIORITY OVERNIGHT

TRK# 2802 1009 1931
0201

E3 JRBA

10022
NY-US EWR



Marisa Warshaw

From: TrackingUpdates@fedex.com
Sent: Thursday, June 10, 2021 9:16 AM
To: Marisa Warshaw
Subject: [EXTERNAL] FedEx Shipment 280210091931: Your package has been delivered



x

Hi. Your package was
delivered Thu, 06/10/2021 at
9:12am.



Delivered to 800 3RD AVE, New York, NY 10022

OBTAIN PROOF OF DELIVERY

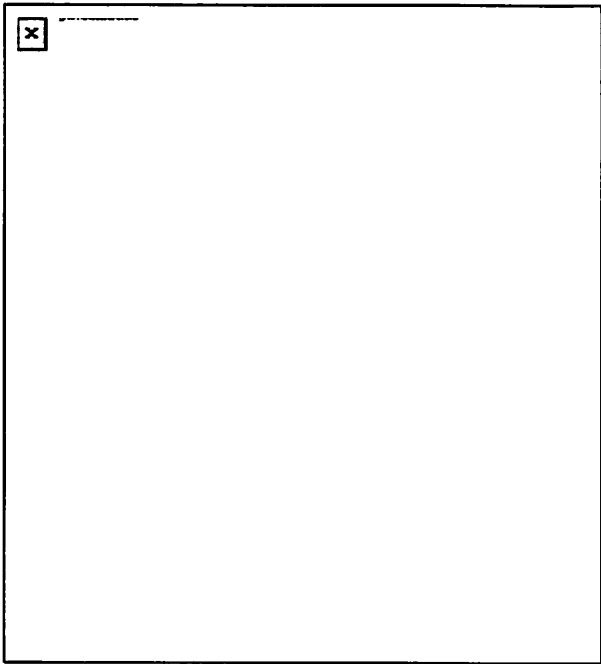
TRACKING NUMBER [280210091931](#)

FROM DelBello Donnellan Weingarten Wise
1 N Lexington Ave
White Plains, NY, US, 10601

TO Michelman & Robinson LLP
John Giardino, Esq.
800 Third Avenue

24th Floor
New York, NY, US, 10022

REFERENCE	0181960-001
SHIPPER REFERENCE	0181960-001
SHIP DATE	Wed 6/09/2021 06:19 PM
PACKAGING TYPE	FedEx Envelope
ORIGIN	White Plains, NY, US, 10601
DESTINATION	New York, NY, US, 10022
SPECIAL HANDLING	Deliver Weekday
NUMBER OF PIECES	1
TOTAL SHIPMENT WEIGHT	0.50 LB
SERVICE TYPE	FedEx Priority Overnight



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To: marisa@ddw-law.com

Message Score: 1

High (60): Pass

From:

My Spam Blocking Level: High

Medium (75): Pass

prvs=57954c79dc=bounce@nds.fedex.com

Low (90): Pass

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